

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:	)	Group Art Unit: 2812
Shunpei YAMAZAKI et al.	)	Examiner: Stanetta D. Isaac
Serial No. 10/072,931	)	CERTIFICATE OF MAILING I hereby certify that this correspondence
Filed: February 12, 2002	)	being deposited with the United States Post Service with sufficient postage as First Class
For: METHOD OF MANUFACTURING A	)	Mail in an envelope addressed to
SEMICONDUCTOR DEVICE	)	Commissioner for Patents, P.O. Box 145 Alexandria, VA 22313-1450, on 12-24-06

## INFORMATION DISCLOSURE STATEMENT

Honorable Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In accordance with the provisions of 37 C.F.R. 1.56 and 37 C.F.R. 1.97-1.99, Applicant submits herewith a Form PTO-1449 listing information known to Applicant and requests that this information be made of record in the above identified application. Copies are submitted herewith in accordance with 37 C.F.R. 1.98(a).

A check in the amount of \$180 is being submitted to comply with the provisions of 37 C.F.R. § 1.97(c).

The Commissioner is hereby authorized to charge fees under 37 C.F.R. §§1.16, 1.17, 1.20(a), 1.20(b), 1.20(c), and 1.20(d) (except the Issue Fee) which may be required now or hereafter, or credit any overpayment to Deposit Account No. 50-2280.

Respectfully submitted,

12/29/2006 WABDELR1 00000015 10072931

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PTO/SB/08A (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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Substitute for form 1449A/PTO	Complete if Known		
INFORMATION DISCORPSURE	Application Number	10/072,931	
STATEMENT BY APPLICANT	Filing Date	February 12, 2002	
/	First Named Inventor	Shunpei YAMAZAKI et al.	
(use as many sheets as necessary)	Group Art Unit	2812	
DEC 2 8 2006	Examiner Name	S. Isaac	
Sheet 1 of 1	Attorney Docket Number	0756-2433	

U.S. PATENT DOCUMENTS						
Examiner Cite Initials No. 1	U.S. Patent Document		Name of Patentee or Applicant of Cited	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
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		Office <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>3</sup> (if known)	Applicant of Cited Document	MM-DD-YYYY	Relevant Figures Appear	
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Signature	Constante	

<sup>\*</sup> EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.